VISION)) Juvenile No
) Juvenile No
) FINANCIAL AFFIDAVIT OF PARENT) AND APPLICATION FOR APPOINTMENT) OF COUNSEL/FOR) □ Child □ Parent □ Other:
sel, and under penalty of perjury, the undersigned states:
Birth Date:
E-mail:
City State Zip
Relationship to Child: Parent Other:
Yes, Part Time (List Hours/week:)
or deductions? per hour month year
from any source, before taxes or deductions?
h you? :
pouse make? per hour month year
usehold, has coming in:
, other vehicles, land, houses, buildings, cash, or anything else worth
pans, credit cards, child support, or any other debts:
for all or part of my attorney fees and costs and those of my t, and I must report any changes in the information submitted y of perjury that the statements I make in this application are present me.